

## BASURA BASH REGISTRATION FORM

Saturday, February 18, 2017 Registration 8 am – 9 am Clean-Up 9 am-noon

Date:						
Last name: First:			□ Mr. □ Mrs.	☐ Miss ☐ Ms.	Adult 🗆	Yes □ No Yes □ No
Street address:		Primary ph	one no:		Secondary	y phone no.:
P.O. box:	City:	Shirt Size S, M, L, XL,			L, 3XL S, M, L	
Choose one: ☐ Individual ☐ G	roup /Team & Team Name	Ema	ail address	s;		
Team Member Names & T-Shirt Sizes:	*Each person will need to fill o	ut a liability fo	orm.			
	IN CASE OF	EMERGE	ENCY			
Emergency Contact Name:				Primary	phone no.:	Secondary phone no.:
Signature			Date			





## Cibolo Basura Bash 2017 Release of Liability

Bash of the City of Cibolo, and do hereby agree to assume damage and physical injury from such service, and do her agents and employees in both their public and private cap and causes of action which may arise.	eby release and hold harmless the City of Cibolo, it's,
I, the undersigned, release and authorize the use of any purpose of advertising and related materials.	hotographs taken of the participants below for the
It is further agreed that if the participant is a minor, I the employees to obtain emergency medical treatment for the	parent or guardian, authorize the City of Cibolo agents and e participant should a need arise.
Signed, this theday of	, 20
	<del></del>
	Participant Signature
Parent or Guardian Print Name	Date
Parent or Guardian Signature	